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GENERAL HEADQUARTERS  
SUPREME COMMANDER FOR THE ALLIED POWERS  
Public Health and Welfare Section

WEEKLY BULLETIN

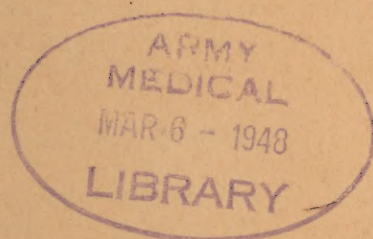
For Period

15 February - 21 February

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SECTION I

GENERAL

Beginning with next week's Bulletin, an English translation of the previous weeks directives issued by the various Bureaus in the Ministry of Welfare to the Prefectures, will be published for the information and guidance of Military Government personnel. Any of these directives that are considered pertinent to the implementation of a current program will be amplified and the important parts extracted for subsequent information of Military Government.

A complete review of all Ministry of Welfare Bureau instructions from 1 January through 14 February will be published in the Bulletin as soon as the information has been compiled by Public Health and Welfare Section.

SECTION II

WELFARE DIVISION

German Nationals

The relief roll of needy German Nationals has dropped to 14 individuals located in the following areas:

Tokyo	6
Karuizawa	2
Matsumoto	1
Kobe	4
Kanagawa	1

This drop was expected due to the fact that all remaining after repatriation had certified that they were able to care for their own needs.

The Japanese Government has been instructed by SCAP that no German persons will be added to the relief rolls in the future until a case history is prepared on each individual showing their resources, their efforts expended in trying to secure employment and until they have made every effort to support themselves from their known assets.

The procedure for prefectural officials, in the future, will be for them to submit to the Ministry of Welfare the case history mentioned above and secure from the Ministry of Welfare permission before additional German Nationals are placed on the relief rolls. All future needy German Nationals cases will be referred to PH&W Section, GHQ, SCAP by the Ministry of Welfare for review before relief is granted.

Social Work Education

The Kansai Social Work Education Committee held their monthly meeting in Kobe, Hyogo Prefecture, on 17 February. Persons attending the meeting included: Public and private welfare officials, representatives of educational institutions in the area, Welfare Officers of the Kyoto, Osaka and Hyogo Military Government Teams and a representative from Welfare Division, PH&W Section, GHQ, SCAP.

Subjects considered at the meeting included: (1) standards of the social work curricula proposed for universities; (2) the establishment of a register of qualified social welfare workers in the Kansai Area; (3) plans for establishing a one year training course in Osaka; (4) the establishment and development of more adequate research facilities in the area. Reports were submitted indicating that definite plans have been developed by Doshisha University, Kyoto, and Kobe Women's College, Hyogo Prefecture, for the establishment of social welfare curricula beginning 1 April. Definite plans have been formulated for a welfare training course, to be established in Osaka, but plans for financing have not been arranged.

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### Reappointment of Minsei-iin

Basic instructions concerning the procedure for reappointment of Minsei-iin are set forth in a directive issued by the Ministry of Welfare on 7 February. (Sha-hatsu No. 17). A translation of these instructions was inclosed with PH&W Weekly Bulletin No. 59.

Additional instructions are contained in a dispatch from the Chief, Social Affairs Bureau to Prefectural Governors (Koseisho Sha-Otsu-Hatsu No. 30) dated 13 February, subject: Reappointment of Minsei-iin. These instructions emphasize that the maximum number of Minsei-iin in a prefecture is not to be increased. In determining the number of Minsei-iin needed consideration is to be given to the number of needy families as well as the population. Minsei-iin who have been appointed as "specialists" in child welfare work will not be reappointed as "specialists" but as regular Minsei-iin since all Minsei-iin will have new responsibilities under the Child Welfare Law. It is permissible to appoint members of the staff of institutions as Minsei-iin.

In determining the number of Minsei-iin needed, it appears that undue emphasis is given to total population and geographical area and insufficient consideration to the number of families requiring aid under the Daily Life Security Law and needing other welfare services.

### Payment of Salaries of Welfare Officials

There have been questions raised concerning the payment of salaries of welfare officials employed in the prefectural Department of Welfare. As a general rule the total base salary of the Chief of the Prefectural Department of Welfare is paid by the National Ministry of Welfare. Information concerning this matter was recently sent to prefectural governors, "Instructions to Prefectural Governors from Chief, Social Affairs Bureau (Koseisho Sha-Otsu-Hatsu No. 33) dated 18 February subject: Grants for salaries and expenses of Chiefs of Prefectural Departments of Welfare." In addition to the grant for salaries the Ministry of Welfare also makes some allowances for travel and office expense of these officials.

The Ministry of Welfare does not participate in the payment of salaries of all officials of the prefectural Department of Welfare but there is in each prefecture a number of such officials for whom the Ministry pays a portion of salaries and other expenses. The percentage of payment by the Ministry is not uniform but varies from 50% to 100%, depending upon the employee. The number of employees for which grants-in-aid are paid by the national government varies according to the size of the prefecture but the average is a total of nine for each prefecture (three second-class officials and six second-class officials).

The national Ministry of Welfare also provides grants-in-aid for the payment of salaries of some welfare officials in larger cities and in prefectural district offices.

### Licensed Agencies for Relief in Asia (LARA)

Overseas shipments, numbers 49, 50 and 51 respectively, to LARA have arrived in Yokohama. These shipments were as follows:

- a. 49th shipment: Arrived aboard the S.S. Luxembourg Victory on 3 February and contained 15.26 tons (food).
- b. 50th shipment: Arrived aboard the S. S. Mount Rogers on 13 February and contained 159.70 tons (clothing, including shoes, 92.22 tons - food, 64.58 tons - miscellaneous, 2.9 tons).
- c. 51st shipment: Arrived aboard the S.S. China Bear on 18 February and contained 76.40 tons (food, 70 tons - clothing, 6.40 tons).

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Community Chest (National Interdependence Campaign)

The participation of public officials in the Community Chest and the use of Community Chest funds in public relief and welfare organizations was set forth in SHA-HATSU No. 1701, dated 10 December 1947, from the Social Affairs Bureau, Ministry of Welfare, reference Public Health and Welfare Section Weekly Bulletin No. 50 (period 8 - 14 December 1947).

SHA-HATSU No. 1701, mentioned above, has been implemented for purposes of clarification, by SHA-HATSU No. 32, dated 14 February 1948, from the Social Affairs Bureau, Ministry of Welfare to the Prefectural Governors. Note: The contents of SHA-HATSU No. 32 are misleading in content and the Social Affairs Bureau is now preparing another SHA-HATSU rescinding same.

Many prefectures have yet to complete their collections for the Community Chest campaign and it has been decided not to officially close (for reporting purposes) the campaign until March.

The progress report of the campaign, as of 21 February, shows ¥558,260,046.19 raised toward the goal of ¥ 683,500,000 or 81.6% of quota attained. Note: The original national goal of ¥ 681,500,000 has been adjusted and is now ¥ 683,500,000. This adjustment was necessary to meet prefectural quotas that have been lowered and raised in some instances.

Japanese Red Cross Society

Nursing: A four weeks' Nurse Instructors' Course has been completed at the Japanese National Red Cross Headquarters on 20 February. Forty-six nurses attended the course representing 31 Red Cross Schools of Nursing. The course consisted of nursing arts, history of nursing, hygiene, and nursing ethics.

Two adult classes in Red Cross Home Nursing have been completed in the Tokyo Chapter this past week. Another class is being organized this coming week.

Junior Red Cross: Five Junior Red Cross Albums have been completed during the month by the following schools: Takami Primary School, Nagoya, Aichi Prefecture; Grades 1 - 6; Okosi Dai 3 - Primary School, Aichi Prefecture 6th Grade; Yuda School, Yamaguchi City, Yamaguchi Prefecture Grades 1 - 6; Misima School, Okasaki City, Aichi Prefecture Grade 6; Misima School, Okasaki City, Aichi Prefecture Grade 5.

The above albums have been shipped to Junior Red Cross at the American National Red Cross Headquarters and will be distributed to American Junior Red Cross groups in American Schools.

On February 13th a four day Junior Red Cross leadership training conference was completed at Gohra, Kanagawa Prefecture. Forty-two delegates from the following eight prefectures attended:

Tochigi	Chiba
Ibaraki	Gumma
Tokyo	Saitama
Kanagawa	Nara

The conference was a successful one, as much interest was shown by the delegates and there was a considerable amount of informal discussion. Expressions from the delegates indicated that they were getting a very clear understanding of the way in which Junior Red Cross fits into the new educational system.

The Junior Red Cross handbook, which has been in the process of preparation since the summer of 1947, has been completed. The handbook went to the printers on February 16 and should be off the press April 1. In the meantime, an English translation is being prepared and will be sent, in the near future, to all Military Government Teams.

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SECTION III

VETERINARY AFFAIRS DIVISION

A visit was made to the farm area surrounding Hammatsu, Hamana-gun, Shizuoka, to select 70 purebred Berkshire hogs for shipment to Okinawa. Of this group 48 were gilts ranging in age from 3 months to 12 months and 22 were Boars ranging in age from 3 months to 13 months. All were in fine condition and immediately were vaccinated against Hog Cholera and Swine Erysipelas. Shipment will be made to Okinawa during March from the quarantine station located in Yokohama.

Weekly Animal Disease Report

The Ministry of Agriculture and Forestry reported the following outbreak of diseases for the period 14-20 February:

<u>Prefecture</u>	<u>Disease</u>	<u>No. of Cases</u>
Tokyo	Swine Cholera	8
Yamaguchi	Anthrax	1

SECTION IV

NURSING AFFAIRS DIVISION

The National Midwifery Course program planned by the Ministry of Welfare to be held in the following eight cities of Japan, namely Sapporo, Akita, Niigata, Nagoya, Kyoto, Kobe, Hiroshima and Kumamoto, will be inaugurated in Kumamoto on 16 March. Dates for the courses to be held in the remaining seven cities will be announced later. The Ministry of Welfare has forwarded details of these courses to Midwives throughout Japan. A representative of Public Health and Welfare will attend each course and present a series of lectures on Midwifery. Lectures are currently being prepared in Japanese with sufficient copies available for distribution to each student.

The School of Nursing in Okayama, with a capacity for forty students will open 1 May. The results of the recruiting program have been favorable and application blanks as well as other entrance forms have been prepared and distributed. Prefectures in the immediate surrounding area have been given a quota based on the current enrollment capacity. Personnel from Public Health and Welfare Section plan to initiate refresher courses sometime in March and for the Nurses currently working in the school of nursing hospital, and will also prepare a program for the new students enrolling in the school of nursing 1 May.

The Model Demonstration School in Tokyo is now planning to increase the size of the nursery to 80 cribs. This Nursery opened in 1946 with six cribs and currently has 30.

SECTION V

SUPPLY DIVISION

Distribution

Spraying equipment for use in insect and rodent control was shipped to four prefectures during the period 8 -14 February. A total of 360 sprayers was distributed under Ministry of Welfare supervision as listed below. No DDT dusters were shipped during this period.

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<u>Prefecture</u>	<u>Knapsack Sprayer</u>	<u>Semiautomatic Sprayer</u>	<u>Hand Sprayer</u>
Kagoshima	120	70	0
Kochi	0	40	0
Osaka	0	0	60
Hyogo	<u>0</u>	<u>0</u>	<u>70</u>
Total	120	110	130

Reference is made to the list of official documents and communications which have been issued covering the ration plan of distribution of controlled medical supplies now effective. This list was published in the previous edition of the Weekly Bulletin, Number 59, 9 - 14 February. The following is added:

File EIHATSU No. 67, dated 5 February 1947

From : Chief, Medical Affairs Bureau, Ministry of Welfare.

To : Urban or Prefectural Governor

Subject : Regarding the Enforcement of the Ordinance on the Distribution of Medicines and Other Medical Supplies.

To properly communicate ideas an understanding of the definition of terms is necessary. Quoted below is Article 2 of Ministry of Welfare Ordinance No. 30, dated 11 November 1947, on the distribution of medicines and other medical supplies. This article defines the terms used throughout the ordinance.

"Article 2. In this Ordinance:

"By "dealers" are meant hospitals, clinics, veterinary hospitals, pharmacies, retailers of medicines and other medical supplies and any others who use medical supplies by trade and whom the governor of a metropolis, district or urban or rural prefecture designates.

"By "Designated Consumers" is meant any one who consumes the medical supplies of the designated rationed goods which the Minister of Welfare especially designates from the health and sanitary point of view and whom the governor of a metropolis, district or urban or rural prefecture designates.

"By "sellers" are meant ones who are engaging in sale of the designated rationed goods.

"They are classified into two characters; "Local sellers" and "Central sellers."

"By a local seller is meant a seller whose business area is within the metropolis, district or urban or rural prefecture where he has his business office and who is engaging in sale of the designated rationed goods to the dealers and designated consumers.

"By a central seller is meant one who is engaging in sale of the designated rationed goods to the local sellers or other central sellers.

"By "Manufacturers" or "Importers" are meant ones who are engaging in the production or importation of the designated rationed goods."

#### Production

The weekly report of production of DDT Duster and Spraying Equipment for mosquito and fly control programs indicates the following data for 8 - 14 February.

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	Total Mfgd. to date 7 Feb.	No. Mfgd. 8-14 Feb.	Total Mfgd. to date 14 Feb.	Total shipped to date 14 Feb.	Balance on Hand
DDT Dusters	86,346	1,550	87,896	78,756	9,140
Sprayer, knapsack type, 3 gal. capacity	39,443	1,550	40,993	21,539	19,454
Sprayer, pump type, semiautomatic	23,808	900	24,708	13,834	10,874
Sprayer, hand type, 1/2 gal. capacity	37,910	1,000	38,910	29,454	9,456
Power Dusters	-	7	7	-	7
Total	187,507	5,007	192,514	143,583	48,931

Initial production of DDT Duster and Spraying Equipment for the 1948 program is being reported during this period 8 - 14 February. A quota of 100 power dusters is included in the 1948 program. Two companies, in addition to the three manufacturers used in the 1947 program, have received quotas for manufacturing this equipment.

A total of 4,153,556 lbs. of 10% DDT Dust, 314,940 gallons of 5% DDT Residual Effect Spray, and 341,069 vials of Typhus Vaccine represents total stocks on hand in wholesale houses of the Ministry of Welfare as of 14 February.

#### SECTION VI NARCOTIC CONTROL DIVISION

Reports received reveal that a large amount of narcotics burglarized from a Tokyo hospital in 1947 were recovered three months later when the arrest of eight persons, attempting to sell the narcotics illegally, resulted in the seizure of the narcotics. The narcotics were identified by the seal of the hospital pharmacist on the packages of narcotics. Ministry of Welfare and Tokyo-To narcotic officials had attributed little significance to the fact that the source of supply of the narcotics was determined. Ministry officials are being instructed to "direct that source of supply" be made an important and integral part of all investigations and that this information be furnished in all future reports of investigations resulting in the seizure of narcotics.

Efficient methods of conducting a narcotic investigation have been discussed with the Tokyo Procurators' Office and with officials from the Prosecution Bureau, Attorney General's Office (formerly the Ministry of Justice). These officials were informed the purchase of narcotics, by narcotic agents in an undercover capacity or by informants working under their direction, in order to obtain evidence for presentation in Court proceedings, is considered the most effective and conclusive method of conducting a narcotic investigation. They were also informed narcotic agents are receiving instruction in this procedure which will be used more and more to obtain evidence in order to eliminate defendants' being brought to trial for violations in which the only evidence is statements of witnesses or of defendants.

#### SECTION VII PREVENTIVE MEDICINE DIVISION

##### Typhus Fever

Comparative Score (Includes figures 1 January - 16 February)

Reported Cases	1946	1,299
	1947	384
	1948	124 (of this number 90 have been confirmed as typhus including epidemic and murine).

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### Spray Schedule

Even though the reported incidence of typhus fever is comparatively low at the present time, we cannot afford to relax our vigilance and our efforts in the typhus control program. Reports filtering in from the field indicate that the spray program for jails, theaters, public bath houses, orphanages, railway stations, railway coaches, street cars, buses miscellaneous public conveyances, is being neglected in areas where epidemic typhus fever has been endemic for several years. IIT residual spray treatment of the places mentioned above is not only an important part of the typhus control program but is invaluable in the general control program of flies, mosquitoes and other insects which may live, or find harborage in jails theaters, etc., or which may secure transportation by means of public conveyances including trains, coaches, ships and vessels. Military Government Health Officers should determine that the responsible Japanese officials carry out the spray program.

DDT, 10% residual effect spray should be applied every 30 days and used at the rate of one quart for each 250 square feet of surface.

### Venereal Disease Control

At the conference of Regional Military Government Health Officers held at Yokohama on 30 January, it was reported that some prefectures still require the carrying of health certificates by prostitutes, as required by Article 6 of Ministry of Welfare Regulation No. 45, dated 22 November 1945, subject: "Complementary Regulation for the Venereal Disease Prevention Law".

A directive dated 16 February 1946 was sent to prefectural governors by the director of the Bureau for Infectious Diseases, Ministry of Welfare, stating that "carrying the health certificates shall be suspended for the time being. The certificates shall be kept in the hospitals or consultation rooms in which the medical examination takes place and shall be made available as records of medical examinations".

Since this directive rescinds article 6 of Regulation No. 45, the practice of issuing health certificates to prostitutes, or requiring them to carry them, is a violation of this directive. This directive should be brought to the attention of prefectural health authorities, and surveillance should be exercised to insure the discontinuance of the practice of issuing health certificates.

### Sanitary Engineering

Municipal Water Shortages: During unusually dry years, such as we are now experiencing, the problem of municipal water shortages becomes a critical one throughout Japan. The only ultimate solution to the problem is a sound national program of water works construction and extension. Such a program is being planned by the Ministry of Welfare and the Construction Board. However, we are faced with the immediate problem of the effect of water shortages and water conservation programs on the public health during the spring and summer of 1948. A water conservation program will influence the incidence of enteric diseases in two ways: The overall quality of city waters as received by the consumer at the household tap will suffer greatly due to the development of negative or suction pressures which may draw contaminating matter into the mains. The shortage of water may cause the consumer to supplement the municipal supply from other sources, such as wells, which are for the most part polluted and highly unsatisfactory from the public health stand point. A sharp rise in the incidence of enteric diseases will accompany these shortages unless all water is either boiled or chlorinated by the individual consumer.

The municipal water bureau should increase the chlorine dosage at the treatment plant so that active chlorine residuals reach the extremities of the distribution system. The recommended standard municipal chlorine residual of 0.1 to 0.2 ppm should be maintained as a very minimum and, if chlorinating equipment and supplies of liquid chlorine permit, higher residuals should be provided. In order that a closer surveillance of water quality may be maintained a greater

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number of bacteriological tests should be performed by the local hygiene laboratory. These determinations will indicate those portions of the distribution grid that are subjected to back-siphonage. A marked decrease in chlorine residuals in a particular section of the system also provides an excellent indication of contamination. Local health offices and Health Centers should be capable of supplying chlorinated lime and instructions for its use to all persons within their districts. Local Health Departments should make a special effort to develop close liaison with the municipal water bureaus since in many instances water works personnel are concerned only with the adequacy of the supply and give little attention to the public health aspects of water conservation.

#### SECTION VIII

##### MEDICAL SERVICE DIVISION

Japanese Civilian Hospital Strength Report for week ending 30 January shows 3,412 hospitals with a capacity of 211,101 beds of which 89,886 were occupied. During this same period 227,088 out-patients were treated.

#### SECTION IX

##### SOCIAL SECURITY DIVISION

###### General

The Insurance Bureau, Ministry of Welfare, reported that the numbers of appeals filed had increased rapidly during the month of January under the Health Insurance, Welfare Pension Insurance and Seamen's Insurance programs. It is believed that this increase will continue as the insurance beneficiaries become better informed concerning their rights under social insurance laws.

The membership of the central appeals boards for the social insurance has been reorganized to exclude government officials engaged in the administration of the programs. The boards, as originally set up under the recent amendments, included personnel regularly employed in the Insurance Bureau and actually responsible for the determinations upon which appeals are based. The advisory councils as distinguished from the appeals boards and created under each of the social insurance laws, count the Chief of the Social Insurance Bureau among their respective memberships but he is barred from serving as chairman and his participation is limited to providing technical assistance as requested by the councils.

###### National Health Insurance

In a recent prefecture survey it was revealed that only one out of 40 suspended National Health Insurance Associations had a doctor on their board either as a member or as a medical consultant. It was further found upon inspection of several active associations in the prefecture that each has a doctor either as a full time employee or as a member of their board. This confirms the opinion that many doctors do cooperate and are doing so at the official rate of charges per point of treatment.

It was further indicated by the survey that premium rates by the associations are expected to increase after 1 April in order to meet the rising cost of medical care.

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SECTION X

MEMORANDA TO JAPANESE GOVERNMENT

<u>PHJG</u>	<u>DATE</u>	<u>SUBJECT</u>	<u>SURVEILLANCE</u>	<u>DISTRIBUTION</u>
59	2/18/48	Institutional Care for the Physically Handicapped	None	MG HQ 8th A

Note: Directive to the Ministry of Welfare offering no objection to a plan submitted by the Ministry on the above subject.

*Crawford F. Sams*

CRAWFORD F. SAMs  
Colonel, Medical Corps  
Chief

1 Incl: Summary Report of Cases and Deaths from Communicable Diseases in Japan, week ending 14 January 1948.

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DIGEST OF WEEKLY REPORT OF COMMUNICABLE DISEASES IN JAPAN  
FOR THE WEEK ENDING 14 FEBRUARY 1948

During the week ending 14 February 1948 a total of 10,796 communicable disease cases were reported. This was a slight increase over the number (10,171) recorded in the preceding week. The completeness of reporting was better for all diseases except malaria. One prefecture (Oita) failed to send in a report on the incidence of any of the communicable diseases. Two additional prefectures (Niigata and Kyoto) failed to submit a report on any of the 5 non-acute communicable diseases (measles, whooping cough, tuberculosis, pneumonia and influenza). Three prefectures (Saitama, Oita and Kagoshima) failed to report the venereal diseases. Reports on the incidence of malaria were received from only 26 of the 46 prefectures.

Approximately 94 percent of the total communicable disease cases were credited to: tuberculosis (5,215), pneumonia (3,479), measles (744), whooping cough (679), and influenza (70). The current and cumulative case rates per 100,000 population per annum for these diseases were: tuberculosis, 349.2 and 307.9 respectively; pneumonia, 232.9 and 241.5; measles, 49.8 and 47.8; whooping cough, 45.5 and 50.7; and for influenza, 4.7 and 6.2. Slight increases were recorded for all these diseases except one. Whooping cough decreased approximately 6 percent from 725 to 679.

The remaining 12 communicable diseases accounted for 609 cases and 70 deaths currently compared with 731 cases and 82 deaths last week. More than half of these cases and deaths were credited to diphtheria (327 cases and 40 deaths). The incidence of all diseases in this group remained about the same or declined from last week's levels. The current incidence of all except scarlet fever was less than in the corresponding week of 1947.

Diphtheria cases decreased 17 percent from 396 to 327. There were 40 deaths currently compared with 50 last week. In the same week of 1947 and 1946 there were 574 and 1,604 cases respectively. The current and cumulative case rates were 21.9 and 26.9 respectively. Corresponding death rates were 2.7 and 3.2.

The incidence of dysentery decreased. The current cases (25) were approximately 30 percent less than the number (36) reported last week. Deaths declined from 7 to 6. The current cases were less than the figure recorded for the corresponding week of 1947 (35) and 1946 (31). The current and cumulative case rates were 1.7 and 1.8 respectively. Corresponding death rates were 0.4 and 0.5.

Typhoid fever cases decreased nearly 21 percent from 116 to 92. Nine deaths were reported compared with 13 last week. The current number of cases (92) was 55 percent of the number (166) reported in the corresponding week of 1947 and 11 percent of the number (808) in the same week of 1946. The current and cumulative case rates were 6.2 and 7.3 respectively. Corresponding death rates were 0.6 and 0.8.

Paratyphoid fever (31 cases and 3 deaths) remained about the same as last week (39 cases and 3 deaths). The current cases (31) were approximately the same as the number (32) reported in the 7th week of 1947, but were less than half the number (79) recorded in the 7th week of 1946. The current and cumulative case rates were 2.1 and 2.3 respectively. Corresponding death rates were 0.2 and 0.1.

There were no smallpox cases currently compared with one case last week. No deaths have been reported this year. In the corresponding week of 1947 and 1946 there were 13 and 1,027 cases respectively. The cumulative case rate was 0.03.

There were 16 cases and 1 death reported for typhus fever in the current week compared with 12 cases and 3 deaths previously. Half of the current cases were in Tokyo-To. The incidence this week (16 cases) was less than 40 percent of the number (41) reported in the corresponding week of 1947 and less than 5



percent of the number (383) recorded in the same week of 1946. The current and cumulative case rates were 1.1 and 1.2 respectively. Both the current and cumulative death rates were 0.1.

There was no significant change in malaria with 47 cases and 1 death currently compared with 44 cases and no deaths last week. This was less than half the number of cases (109) recorded in the same week last year. The current and cumulative case rates were 3.1 and 3.6 respectively. The corresponding death rates were 0.1 and 0.01.

Scarlet fever cases declined for the fourth consecutive week. The current cases (40) were nearly 22 percent less than the number (51) recorded last week. For the first time in five weeks, one death was recorded. The current cases (40) were 29 percent greater than the number (31) recorded in the 7th week of 1947, but approximately the same as the number (41) for the same week of 1946. The current case rate (2.7) was approximately 25 percent less than the cumulative rate 3.7. The current and cumulative death rates were 0.1 and 0.03 respectively.

Epidemic meningitis accounted for 31 cases and 9 deaths currently compared with 36 cases and 6 deaths last week. The current number of cases (31) was less than the number recorded in the same week of the two previous years (1947, 58 cases and 1946, 37 cases). The current and cumulative case rates were 2.1 and 2.2 respectively. Corresponding death rates were 0.6 and 0.5.

There continued to be no cases or deaths reported for suspect Japanese "B" encephalitis, cholera or plague.

The current and cumulative number of cases of syphilis were 3,466 and 22,371 respectively; for gonorrhea 3,636 and 25,929; and for chancroid 706 and 4,940. The incidence of all venereal diseases declined from last week's level. Syphilis cases decreased nearly 20 percent from 4,271 to 3,466; gonorrhea 6 percent from 3,878 to 3,636; and chancroid 10 percent from 784 to 706. However, compared with the number of cases of syphilis (2,604) recorded in the same week of 1947, there was an increase of 862 cases. In the 7th week of 1947, gonorrhea and chancroid accounted for 3,616 and 796 cases respectively. The current and cumulative case rates for syphilis were 232.1 and 214.0 respectively; and for gonorrhea 243.4 and 248.0. Both the current and cumulative case rate for chancroid was 47.3.



SUMMARY REPORT OF CASES AND DEATHS FROM  
COMMUNICABLE DISEASES IN JAPAN

Week Ending 14 February 1948

PREFECTURE	DIPHTHERIA				DYSENTERY			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	22	4	251	45	1	-	10	3
AOMORI	3	1	39	5	-	-	1	-
IWATE	6	-	64	9	1	1	3	2
MIYAGI	7	-	61	1	2	-	4	-
AKITA	20	-	111	8	-	-	2	-
YAMAGATA	6	1	40	5	-	-	3	-
FUKUSHIMA	1	-	20	3	-	-	-	-
IBARAKI	8	-	44	-	-	-	3	2
TOCHIGI	5	1	67	9	2	-	6	-
CUMMA	10	3	63	11	1	-	9	1
SAITAMA	9	1	62	4	-	-	2	-
CHIBA	2	-	*21	-	3	-	3	-
TOKYO	23	7	177	25	5	1	38	10
KANAGAWA	8	1	74	10	-	-	9	6
NIIGATA	16	1	*127	13	-	-	4	-
TOYAMA	2	1	16	*5	-	-	1	-
ISHIKAWA	1	-	48	7	-	-	-	-
FUKUI	2	1	16	4	-	-	-	-
YAMANASHI	2	-	11	-	-	-	2	-
NAGANO	10	1	84	4	1	-	8	-
GIFU	-	-	14	3	-	-	2	-
SHIZUOKA	2	2	44	10	1	-	5	1
AICHI	22	3	100	7	1	-	7	1
MIE	6	1	47	4	-	-	-	-
SHIGA	2	-	16	-	1	-	2	-
KYOTO	4	-	43	8	-	1	11	4
OSAKA	2	-	50	5	2	-	9	1
HYOGO	8	1	71	10	1	-	7	-
NARA	3	-	17	2	-	-	-	-
WAKAYAMA	3	-	20	2	-	-	2	3
TOTTORI	4	2	13	2	-	-	-	-
SHIMANE	3	-	*57	*8	-	-	-	-
OKAYAMA	5	1	43	4	-	-	1	-
HIROSHIMA	8	-	67	2	-	-	2	-
YAMAGUCHI	4	-	38	1	1	-	3	1
TOKUSHIMA	4	1	*14	2	-	-	-	-
KAGAWA	3	2	13	*5	-	-	2	*1
EHIME	9	-	95	15	2	2	5	4
KOCHI	4	-	32	3	-	-	-	-
FUKUOKA	21	1	169	19	-	1	7	3
SAGA	24	1	133	9	-	-	2	1
NAGASAKI	9	-	94	11	-	-	7	-
KUMAMOTO	4	-	35	1	-	-	2	-
OITA	NR	NR	54	16	NR	NR	1	9
MIYAZAKI	-	1	69	6	-	-	1	-
KAGOSHIMA	10	1	65	8	-	-	2	-
TOTAL	327	40	*2809	*331	25	6	188	*53

RATE								
Current	21.9	2.7	26.9	3.2	1.7	0.4	1.8	0.5
Previous	26.5	3.3			2.4	0.5		

Rate per 100,000 per Annum, based upon census population 1 October 1947.  
\*Cumulative figure adjusted for delayed and corrected reports.



Weekly Report - 14 February 1948  
Continued

PREFECTURE	TYPHOID				PARATYPHOID			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	2	-	20	3	2	-	9	1
AOMORI	1	-	5	-	-	-	-	1
IWATE	1	-	3	-	1	-	1	-
MIYAGI	1	-	7	-	1	-	5	-
AKITA	-	-	1	-	-	-	-	-
YAMAGATA	1	-	6	1	-	-	1	-
FUKUSHIMA	4	-	21	3	-	-	4	1
IBARAKI	2	-	20	3	-	-	2	-
TOCHIGI	2	-	8	2	-	-	3	-
GUMMA	-	-	12	1	3	-	6	-
SAITAMA	-	1	19	3	-	1	5	1
CHIBA	2	-	*32	*1	-	-	2	-
TOKYO	11	-	100	9	8	-	67	1
KANAGAWA	6	1	55	8	1	-	22	-
NIIGATA	2	-	*25	1	1	-	13	1
TOYAMA	1	-	5	-	-	-	2	1
ISHIKAWA	1	-	3	-	-	-	2	-
FUKUI	-	-	6	1	1	-	1	-
YAMANASHI	-	-	2	-	-	1	8	2
YAGANO	-	-	4	-	-	-	2	-
GIFU	5	-	45	5	1	-	8	-
SHIZUOKA	4	-	35	2	-	-	12	1
AICHI	5	-	27	-	3	-	12	-
MIE	6	-	33	1	-	-	*7	-
SHIGA	-	-	3	1	1	-	3	-
KYOTO	3	1	18	3	2	1	4	1
OSAKA	3	1	22	4	1	-	3	-
HYOGO	10	3	34	7	-	-	1	-
NERA	-	-	5	-	-	-	-	-
WAKAYAMA	3	-	19	2	-	-	-	-
TOTTORI	-	-	*5	1	1	-	2	1
SHIMANE	3	-	*14	-	1	-	2	-
OKAYAMA	-	-	13	-	-	-	*1	-
HIROSHIMA	2	-	20	1	-	-	4	-
YAMAGUCHI	-	-	1	-	-	-	*3	1
TOKUSHIMA	1	-	*8	1	-	-	1	-
KAGAWA	1	-	8	*4	-	-	-	1
EHIME	1	1	12	2	1	-	7	-
KOCHI	-	-	11	3	-	-	4	-
FUKUOKA	7	1	31	6	1	-	10	-
SAGA	-	-	4	-	-	-	1	1
NAGASAKI	-	-	16	3	1	-	1	-
KUMAMOTO	-	-	3	-	-	-	1	-
OITA	NR	NR	8	-	NR	NR	-	-
MIZUZAKI	1	-	9	1	-	-	3	-
KAGOSHIMA	-	-	1	-	-	-	-	-
TOTAL	92	9	*759	*83	31	3	*245	15
RATE								
Current	6.2	0.6	7.3	0.8	2.1	0.2	2.3	0.1
Previous	7.8	0.9			2.6	0.2		

Rate per 100,000 per Annum, based upon census population 1 October 1947.

\* Cumulative figure adjusted for delayed and corrected reports.



Weekly Report - 14 February 1948  
Continued

PREFECTURE	SMALLPOX				TYPHUS FEVER			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	-	-	2	-	3	-	6	3
AOMORI	-	-	-	-	-	-	6	1
IWATE	-	-	-	-	-	-	1	1
MIVAGI	-	-	-	-	-	-	-	-
AKITA	-	-	-	-	-	-	-	-
YAMAGATA	-	-	-	-	-	-	-	-
FUKUSHIMA	-	-	-	-	-	-	-	-
IBARAKI	-	-	-	-	-	-	-	-
TOCHIGI	-	-	-	-	-	-	-	-
GUNTA	-	-	-	-	-	-	-	-
SAITAMA	-	-	-	-	-	-	3	-
CHIBA	-	-	-	-	-	-	1	-
TOKYO	-	-	1	-	2	1	41	2
KANAGAWA	-	-	-	-	4	-	9	2
NIIGATA	-	-	-	-	-	-	*1	-
TOYAMA	-	-	-	-	-	-	2	-
ISHIKAWA	-	-	-	-	-	-	1	-
FUKUI	-	-	-	-	-	-	-	-
YA ANASHI	-	-	-	-	-	-	-	-
NAGANO	-	-	-	-	-	-	1	-
GIFU	-	-	-	-	-	-	2	-
SHIZUOKA	-	-	-	-	-	-	-	-
AICHI	-	-	-	-	-	-	-	-
MIE	-	-	-	-	-	-	-	-
SHIGA	-	-	-	-	-	-	-	-
KYOTO	-	-	-	-	-	-	-	-
OSAKA	-	-	-	-	-	-	26	2
HYOGO	-	-	-	-	-	-	-	-
NARA	-	-	-	-	-	-	3	-
WAKAYAMA	-	-	-	-	-	-	-	-
TOTTORI	-	-	-	-	-	-	-	-
SHIMANE	-	-	-	-	-	-	*4	-
OKAYAMA	-	-	-	-	-	-	-	-
HIROSHIMA	-	-	-	-	1	-	6	-
YAMAGUCHI	-	-	-	-	-	-	-	-
TOKUSHIMA	-	-	-	-	-	-	-	-
KAGAWA	-	-	-	-	-	-	2	-
EHIME	-	-	-	-	-	-	-	-
KOCHI	-	-	-	-	-	-	-	-
FUKUOKA	-	-	-	-	-	-	-	-
SAGA	-	-	-	-	-	-	-	-
NAGASAKI	-	-	-	-	-	-	7	2
KUMAMOTO	-	-	-	-	-	-	2	-
OITA	NR	NR	-	-	NR	NR	-	-
MIYAZAKI	-	-	-	-	-	-	-	-
KAGOSIMA	-	-	-	-	-	-	-	-
TOTAL	0	0	3	0	16	1	*124	13
Rate								
Current	0.0	0.0	0.03	0.0	1.1	0.1	1.2	0.1
Previous	0.1	0.0			0.8	0.2		

Rate per 100,000 per Annum  
Rate based upon census population 1 Oct 1947  
\*Cumulative figure adjusted for delayed and corrected reports.



Weekly Report - 14 February 1948  
Continued

PREFECTURE	MALARIA				CHOLERA			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	2	-	12	-	-	-	-	-
AOMORI	-	-	6	-	-	-	-	-
IWATE	-	-	3	-	-	-	-	-
MIYAGI	-	-	5	-	-	-	-	-
AKITA	-	-	3	-	-	-	-	-
YAMAGATA	NR	NR	1	-	-	-	-	-
FUKUSHIMA	1	-	5	-	-	-	-	-
IBARAKI	NR	NR	8	-	-	-	-	-
TOCHIGI	1	-	6	-	-	-	-	-
GUMMA	-	-	4	-	-	-	-	-
SAITAMA	NR	NR	1	-	-	-	-	-
CHIBA	NR	NR	1	-	-	-	-	-
TOKYO	NR	NR	22	-	-	-	-	-
KANAGAWA	NR	NR	19	-	-	-	-	-
NIIGATA	NR	NR	5	-	-	-	-	-
TOYAMA	4	-	7	-	-	-	-	-
ISHIKAWA	NR	NR	3	-	-	-	-	-
FUKUI	-	-	-	-	-	-	-	-
YAMANASHI	NR	NR	-	-	-	-	-	-
NAGANO	1	-	1	-	-	-	-	-
GIFU	1	-	9	-	-	-	-	-
SHIZUOKA	1	-	4	-	-	-	-	-
AICHI	4	-	11	-	-	-	-	-
MIE	1	-	9	-	-	-	-	-
SHIGA	NR	NR	10	-	-	-	-	-
KYOTO	NR	NR	5	-	-	-	-	-
OSAKA	NR	NR	9	-	-	-	-	-
HYOGO	5	-	11	-	-	-	-	-
NARA	3	-	*4	-	-	-	-	-
WAKAYAMA	2	-	5	-	-	-	-	-
TOTTORI	1	-	6	-	-	-	-	-
SHIMANE	NR	NR	*5	-	-	-	-	-
OKAYAMA	NR	NR	*4	-	-	-	-	-
HIROSHIMA	NR	NR	6	-	-	-	-	-
YAMAGUCHI	NR	NR	27	-	-	-	-	-
TOKUSHIMA	NR	NR	4	-	-	-	-	-
KAGAWA	2	-	5	-	-	-	-	-
EHIME	4	-	23	-	-	-	-	-
KOCHI	-	-	2	-	-	-	-	-
FUKUOKA	8	-	51	-	-	-	-	-
SAGA	1	-	6	-	-	-	-	-
NAGASAKI	NR	NR	10	-	-	-	-	-
KUMAMOTO	4	1	7	1	-	-	-	-
OITA	NR	NR	17	-	NR	NR	-	-
MIYAZAKI	NR	NR	2	-	-	-	-	-
KAGOSHIMA	1	-	9	-	-	-	-	-
TOTAL	47	1	*373	1	0	0	0	0

Rate								
Current	3.1	0.1	3.6	0.01	0.0	0.0	0.0	0.0
Previous	2.9	0.0			0.0	0.0		

Rate per 100,000 per Annum

Rate based upon census population 1 Oct 1947

\*Cumulative figure adjusted for delayed and corrected reports.



Weekly Report - 14 February 1948  
Continued

PREFECTURE	MEASLES		WHOOPIING COUGH		TUBERCULOSIS	
	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases
HOKKAIDO	43	260	47	296	462	2952
AOMORI	15	82	11	100	114	569
IWATE	17	183	14	170	131	1026
MIYAGI	19	*257	8	*117	67	*627
AKITA	5	68	25	124	110	742
YAMAGATA	7	35	1	60	50	397
FUKUSHIMA	3	42	17	152	60	628
IBARAKI	2	76	13	91	86	548
TOCHIGI	3	46	16	166	89	451
GUMMA	5	44	13	180	75	424
SAITAMA	1	6	12	91	36	398
CHIBA	-	-	8	*44	28	*375
TOKYO	7	40	24	293	404	2535
KANAGAWA	-	14	32	315	347	1518
NIIGATA	NR	*96	NR	*189	NR	*678
TOYAMA	24	63	68	231	109	615
ISHIKAWA	3	30	14	125	110	617
FUKUI	18	122	3	50	18	165
YAMANASHI	-	*9	-	*50	27	*207
NAAGANO	20	147	18	160	107	791
GIFU	19	188	-	45	55	498
SHIZUOKA	11	65	20	105	161	784
AICHI	11	100	12	77	220	1191
RIE	13	124	11	100	48	413
SHIGA	-	29	9	77	35	238
KYOTO	NR	*45	NR	*58	NR	*592
OSAKA	57	87	1	37	338	1553
HYOGO	17	54	4	37	153	649
NARA	-	-	-	4	13	210
WAKAYAMA	2	33	5	56	46	246
TOTTORI	14	108	-	21	55	390
SHIMANE	3	*42	26	*147	182	*580
OKAYAMA	22	*110	12	*109	79	*388
HIROSHIMA	52	301	30	118	225	1162
YAMAGUCHI	11	56	14	53	75	397
TOKUSHIMA	3	83	3	35	59	338
KAGAWA	64	177	2	30	46	267
EHIME	85	692	13	137	314	1223
KOCHI	62	470	23	63	49	297
FUKUOKA	24	98	79	465	342	2175
SAGA	6	29	28	141	68	456
NAGASAKI	10	85	14	93	74	542
KUMAMOTO	16	108	20	89	71	354
OITA	NR	27	NR	68	NR	257
MIYAZAKI	43	105	6	18	51	373
KAGOSHIMA	7	163	3	112	26	356
TOTAL	744	*4999	679	*5299	5215	*32192

RATE						
Current	49.8	47.8	45.5	50.7	349.2	307.9
Previous	45.9		48.5		306.5	

Rate per 100,000 per Annum, based upon census population 1 October 1947.  
Deaths not available.

\*Cumulative figure adjusted for delayed and corrected reports.



Weekly Report -- 14 Feb 1948  
Continued

PREFECTURE	SCARLET FEVER				EPIDEMIC MENINGITIS				JAP. B. ENCEPHALITIS (SUSPECTS)			
	Current		Cumulative		Current		Cumulative		Current		Cumulative	
	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)
HONKAI DO	8	-	122	-	2	1	27	5	-	-	-	-
AOMORI	-	-	2	-	1	1	6	2	-	-	-	-
IWATE	-	-	2	-	2	-	5	-	-	-	-	-
MIYAGI	3	-	9	-	2	-	11	-	-	-	-	-
AKITA	1	-	3	-	-	-	6	1	-	-	-	-
YAMAGATA	-	-	5	-	-	-	3	-	-	-	-	-
FUKUSHIMA	-	-	1	-	-	-	8	-	-	-	-	-
IBARAKI	-	-	4	-	2	-	6	-	-	-	-	-
TOCHIGI	1	-	1	-	-	-	-	-	-	-	-	-
GUMMA	-	-	2	-	-	-	4	2	-	-	-	-
SAITAMA	-	-	4	-	-	-	2	-	-	-	-	-
CHIBA	-	-	*1	-	-	-	*1	-	-	-	-	-
TOKYO	8	-	63	1	9	1	52	11	-	-	-	-
KANAGAWA	2	-	16	-	4	1	19	3	-	-	-	-
NIIGATA	-	-	*2	-	-	-	5	2	-	-	-	-
TOYAMA	1	-	3	-	1	1	3	2	-	-	-	-
ISHIKAWA	-	-	-	-	-	-	1	1	-	-	-	-
FUKUI	-	-	-	-	-	-	-	-	-	-	-	-
YAMANASHI	1	-	3	-	2	-	3	-	-	-	-	-
NAAGANO	2	-	9	-	-	-	4	1	-	-	-	-
GIFU	-	-	4	-	-	-	1	-	-	-	-	-
SHIZUOKA	-	-	10	1	-	-	8	2	-	-	-	-
AICHI	3	-	30	-	-	-	2	1	-	-	-	-
MIE	-	-	*6	-	-	-	-	-	-	-	-	-
SHIGA	1	-	5	-	-	-	-	-	-	-	-	-
KYOTO	2	-	13	-	1	-	7	3	-	-	-	-
OSAKA	1	-	16	-	-	-	7	1	-	-	-	-
HYOGO	2	-	7	-	-	-	5	3	-	-	-	-
NARA	-	-	-	-	1	-	1	-	-	-	-	-
WAKAYAMA	-	-	2	-	-	-	1	-	-	-	-	-
TOTTORI	-	-	-	-	-	-	3	2	-	-	-	-
SHIMANE	-	-	*2	-	-	-	-	-	-	-	-	-
OKAYAMA	-	-	5	-	-	-	2	1	-	-	-	-
HIROSHIMA	-	-	6	-	-	-	1	-	-	-	-	-
YAMAGUCHI	-	-	-	-	-	-	-	-	-	-	-	-
TOKUSHIMA	-	-	2	-	-	-	-	-	-	-	-	-
KAGAWA	-	-	2	-	-	-	*4	-	-	-	-	-
EHIME	-	-	5	-	-	-	2	1	-	-	-	-
KOCHI	2	-	3	-	-	-	-	-	-	-	-	-
FUKUOKA	1	1	7	1	3	2	8	4	-	-	-	-
SAGA	-	-	-	-	-	-	2	-	-	-	-	-
NAGASAKI	1	-	3	-	-	-	1	-	-	-	-	-
KUMAMOTO	-	-	1	-	1	2	6	4	-	-	-	-
OITA	NR	NR	1	-	NR	NR	-	-	NR	NR	-	-
MIYAZAKI	-	-	-	-	-	-	1	-	-	-	-	-
KAGOSHIMA	-	-	2	-	-	-	4	2	-	-	-	-
TOTAL	40	1	*384	3	31	9	228	*54	0	0	0	0

RATE												
Current	2.7	0.1	3.7	0.03	2.1	0.6	2.2	0.5	0.0	0.0	0.0	0.0
Previous	3.4	0.0			2.4	0.4			0.0	0.0		

Rate per 100,000 per Annum, based upon census population 1 Oct 1947.

\* Cumulative figure adjusted for delayed and corrected reports.



Monthly Report - 14 February 1948  
Continued

PREFECTURE	PNEUMONIA		INFLUENZA	
	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases
HOKKAIDO	218	1766	-	*28
AOMORI	57	363	3	7
IWATE	55	423	1	1
MIYAGI	31	*596	-	1
AKITA	65	367	-	-
YAMAGATA	23	244	-	-
FUKUSHIMA	54	722	-	*1
IBARAKI	112	1092	-	-
TOCHIGI	59	480	-	4
GUMMA	96	641	-	7
SAITAMA	65	410	-	3
CHIBA	47	*196	-	-
TOKYO	167	1022	4	23
KANAGAWA	141	948	1	22
NIIGATA	NR	*497	NR	1
TOYAMA	141	596	-	10
ISHIKAWA	73	562	-	3
FUKUI	15	142	-	14
YAMANASHI	31	*170	-	-
NAGANO	94	662	-	10
GIFU	38	757	1	4
SHIZUOKA	138	661	4	6
AICHI	140	866	-	*14
MIE	65	580	-	1
SHIGA	43	337	-	1
KYOTO	NR	*287	NR	*7
OSAKA	71	522	-	18
HYOGO	63	*293	-	2
NARA	9	145	-	1
WAKAYAMA	110	738	5	42
TOTTORI	18	173	-	3
SHIMANE	150	*735	1	5
OKAYAMA	51	*314	2	*14
HIROSHIMA	94	656	15	63
YAMAGUCHI	42	361	-	1
TOKUSHIMA	66	477	-	*16
KAGAWA	70	279	-	*7
EHIME	190	1212	1	117
KOCHI	44	453	3	3
FUKUOKA	215	1242	27	*131
SAGA	90	612	-	5
NAGASAKI	74	468	-	-
KUMAMOTO	80	380	2	12
OITA	NR	221	NR	35
MIYAZAKI	41	189	-	-
KAGOSHIMA	33	394	-	-
TOTAL	3479	25251	70	*643
RATE				
Current	232.9	241.5	4.7	6.2
Previous	226.9		4.2	

Rate per 100,000 per Annum, based upon census population 1 Oct 1947.

Deaths not available.

\*Cumulative figure adjusted for delayed and corrected reports.



NUMBER OF CASES AND DEATHS OF COMMUNICABLE DISEASES  
FOR COMPARABLE PERIOD, 1947 and 1948

Diseases	Week Ending		Four Weeks Ending		Cumulative Number	
	14 Feb	15 Feb	14 Feb	15 Feb	for first 7 weeks	
	1948	1947	1948	1947	1948	1947
Cases						
Diphtheria	327	574	1663	2775	2809	4821
Dysentery	25	35	118	243	188	412
Typhoid	92	166	468	900	759	1745
Paratyphoid	31	32	159	215	245	377
Smallpox	0	13	2	59	3	105
Typhus Fever	16	41	82	186	124	371
Malaria	47	109	248	581	373	1066
Cholera	0	0	0	0	0	0
Scarlet Fever	40	31	220	198	384	317
Epidemic Meningitis	31	58	152	241	228	348
Jap B Encephalitis	0	0	0	0	0	1
(Suspects)						
Plague	0	0	0	0	0	0
Deaths						
Diphtheria	40	61	194	294	331	476
Dysentery	6	13	25	50	53	104
Typhoid	9	32	48	145	83	217
Paratyphoid	3	4	12	15	15	23
Smallpox	0	1	0	5	0	10
Typhus Fever	1	5	9	15	13	27
Malaria	1	2	1	4	1	5
Cholera	0	0	0	0	0	0
Scarlet Fever	1	1	1	5	3	6
Epidemic Meningitis	9	10	39	59	54	79
Jap B Encephalitis	0	0	0	0	0	2
(Suspects)						
Plague	0	0	0	0	0	0

CASE AND DEATH RATES OF COMMUNICABLE DISEASES  
FOR COMPARABLE PERIOD, 1947 and 1948

Diseases	Week Ending		Four Weeks Ending		Cumulative Rates	
	14 Feb	15 Feb	14 Feb	15 Feb	for first 7 weeks	
	1948	1947	1948	1947	1948	1947
Case Rate						
Diphtheria	21.9	38.4	27.8	46.4	26.9	46.0
Dysentery	1.7	2.3	2.0	4.1	1.8	3.9
Typhoid	6.2	11.1	7.8	15.0	7.3	16.7
Paratyphoid	2.1	2.1	2.7	3.6	2.3	3.6
Smallpox	0.0	0.9	0.03	1.0	0.03	1.0
Typhus Fever	1.1	2.7	1.4	3.1	1.2	3.5
Malaria	3.1	7.3	4.2	9.7	3.6	10.2
Cholera	0.0	0.0	0.0	0.0	0.0	0.0
Scarlet Fever	2.7	2.1	3.7	3.3	3.7	3.0
Epidemic Meningitis	2.1	3.9	2.5	4.0	2.2	3.3
Jap B Encephalitis	0.0	0.0	0.0	0.0	0.0	0.01
(Suspects)						
Plague	0.0	0.0	0.0	0.0	0.0	0.0
Death Rate						
Diphtheria	2.7	4.1	3.2	4.9	3.2	4.5
Dysentery	0.4	0.9	0.4	0.8	0.5	1.0
Typhoid	0.6	2.1	0.8	2.4	0.8	2.1
Paratyphoid	0.2	0.3	0.2	0.3	0.1	0.2
Smallpox	0.0	0.1	0.0	0.1	0.0	0.1
Typhus Fever	0.1	0.3	0.2	0.3	0.1	0.3
Malaria	0.1	0.1	0.02	0.1	0.01	0.05
Cholera	0.0	0.0	0.0	0.0	0.0	0.0
Scarlet Fever	0.1	0.1	0.02	0.1	0.03	0.1
Epidemic Meningitis	0.6	0.7	0.7	1.0	0.5	0.8
Jap B Encephalitis	0.0	0.0	0.0	0.0	0.0	0.02
(Suspects)						
Plague	0.0	0.0	0.0	0.0	0.0	0.0

NA: Not Available

Rates per 100,000 population per annum.

1947 Rates based upon estimated population 1 July 1947.

1948 Rates based upon census population 1 Oct 1947.



WEEKLY SUMMARY REPORT  
OF  
VENEREAL DISEASES IN JAPAN

WEEK ENDING 14 FEBRUARY 1948

(C) Current cases

(T) Total cases for year to date

PREFECTURE	CHANCROID		GONORRHEA		SYPHILIS	
	(C)	(T)	(C)	(T)	(C)	(T)
HOKKAIDO	13	108	116	*990	87	*525
AOMORI	14	*79	65	430	58	301
IWATE	5	14	6	110	18	154
MIYAGI	4	*71	24	*325	32	*196
AKITA	8	33	89	400	74	380
YAMAGATA	1	11	29	123	51	211
FUKUSHIMA	5	62	60	367	50	301
IBARAKI	14	66	57	330	50	330
TOCHIGI	11	83	45	378	84	480
GUMMA	4	19	47	302	38	280
SAITAMA	NR	40	NR	178	NR	177
CHIBA	15	81	80	492	92	629
TOKYO	60	309	231	1709	165	2669
KANAGAWA	35	365	187	1660	114	1151
NIIGATA	12	*93	61	*456	66	*375
TOYAMA	8	46	66	368	53	368
ISHIKAWA	13	77	57	361	52	260
FUKUI	5	24	33	182	44	200
YAMANASHI	3	36	33	244	23	139
NAGANO	6	56	210	1159	147	886
GIFU	8	70	56	428	61	251
SHIZUOKA	15	*71	69	*425	132	*524
AICHI	71	507	201	1560	138	811
MIE	15	109	59	414	63	451
SHIGA	10	92	30	211	29	208
KYOTO	62	303	324	1332	210	949
OSAKA	50	338	141	1197	298	1538
HYOGO	34	251	187	1278	266	1362
NARA	10	71	22	193	25	233
WAKAYAMA	-	*126	86	*565	32	*325
TOTTORI	6	35	51	307	32	248
SHIMANE	2	*25	29	*175	26	*136
OKAYAMA	18	180	71	655	106	674
HIROSHIMA	31	*196	105	*837	158	*595
YAMAGUCHI	14	63	76	469	54	*368
TOKUSHIMA	3	*40	22	*226	34	*217
KAGAWA	21	60	23	*140	21	126
EHIME	5	52	47	347	51	310
KOCHI	1	24	37	212	23	126
FUKUOKA	54	*350	212	*1677	163	1057
SAGA	12	60	75	540	66	348
NAGASAKI	19	118	115	762	79	533
KUMAMOTO	8	*40	75	483	90	412
OTTA	NR	17	NR	252	NR	144
MIYAZAKI	1	36	27	241	11	103
KAGOSHIMA	NR	*33	NR	*439	NR	*310
TOTAL	706	*4940	3636	*25929	3466	*22371

RATE

Current	47.3	47.3	243.4	248.0	232.1	214.0
Previous	52.5		259.7		286.0	

Rate per 100,000 per annum, based upon census population 1 October 1947.

Deaths not available.

\*Cumulative figure adjusted for delayed and corrected reports.



NUMBER OF CASES AND CASE RATES  
OF VENEREAL DISEASES IN JAPAN  
FOR COMPARABLE PERIODS, 1947 and 1948

Diseases	Week Ending		Four Weeks Ending		Cumulative Number	
	14 Feb	15 Feb	14 Feb	15 Feb	for first 7 weeks	
	1948	1947	1948	1947	1948	1947

Number

Chancroid	706	796	3220	3409	4940	5482
Gonorrhea	3636	3616	17012	14812	25929	23069
Syphilis	3466	2604	15473	9619	22371	14459

Rates

Chancroid	47.3	53.2	53.9	57.0	47.3	52.4
Gonorrhea	243.4	241.7	284.8	247.5	248.0	220.3
Syphilis	232.1	174.1	259.0	160.8	214.0	138.1

Rates per 100,000 population per Annum.

1948 Rates based upon Census population 1 Oct 1947.

1947 Rates based upon estimated population 1 Jul 1947